

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000069572

**Entity Name:** 7425 MONIKA MANOR, LLC**Current Principal Place of Business:**7425 MONIKA MANOR DR  
TAMPA, FL 33625**Current Mailing Address:**10002 PRINCESS PALM AVE, STE 340  
TAMPA, FL 33619 US**FEI Number:** 82-2093382**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VARGAS, CARLOS AP  
7433 MONIKA MANOR DR  
TAMPA, FL 33625 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MD  
Name MIGUEL, RIVERA  
Address 5105 N ARMENIA AVE  
City-State-Zip: TAMPA FL 33603

Title MD  
Name POWELL, SCOTT  
Address 1139 NIKKI VIEW DR  
City-State-Zip: BRANDON FL 33511

Title MD  
Name ROGERS, JEREMY  
Address 1139 NIKKI VIEW DR  
City-State-Zip: BRANDON FL 33511

Title MD  
Name AGLIANO, DENNIS  
Address 5105 N ARMENIA AVE  
City-State-Zip: TAMPA FL 33603

Title MD  
Name LEE, JANET  
Address 7433 MONIKA MANOR DR  
City-State-Zip: TAMPA FL 33625

Title MD  
Name BOOTHBY, RENE  
Address 5105 N ARMENIA AVE  
City-State-Zip: TAMPA FL 33603

Title MD  
Name NOFSINGER, YOON C  
Address 5105 N ARMENIA AVE  
City-State-Zip: TAMPA FL 33603

Title MD  
Name AGNELLO, PETER F  
Address 5105 N ARMENIA AVE  
City-State-Zip: TAMPA FL 33603

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MIGUEL RIVERA

MD

03/19/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date